VAILABLE COPY Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

09/944425

CLAIMS AS FILED (Colum					(Column 2)			SMALL ENTITY TYPE (SZ)		OR	OTHER THAN OR SMALL ENTITY											
TOTAL CLAIMS			50				1	RATE	FEE		RATE	FEE										
FOR 108/30/01			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00										
TOTAL CHARGEABLE CLAIMS			50 minus 20=		• 30			X\$ 9=	270	OR	X\$18=											
INDEPENDENT CLAIMS			minus 3 =		6			X40=	240	OR	X80=											
MU	LTIPLE DEPEN	DENT CLAIM PI	IESENT					+135=		OR	+270=											
* If the difference in column 1 is less than zero, er					r "0" in c	olumn 2	1	TOTAL	B 65	OR	TOTAL											
05/09 (Claims as amended - Part II							<u>L</u>	SMALLE		OR	OTHER SMALL	- · · · · · · · · · · · · · · · · · · ·										
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	S	Minus	**	50	- \		X\$ 9=		OR	X\$18=											
	Independent	. 4	Minus	***	9	- \	11	X40=		OR	X80=											
		NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM]	+135=		OR	+270=											
[0 (10 05 (Column 1) (Column 2) (Column 3)								TOTAL ADDIT, FEE	\$	OR	YOTAL ADDIT, FEE											
l	0 (10)	(Column 1)		(Colu	mn 2)	(Column 3				_												
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HESY ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	. 50	Minus	•	50	- &		X\$ 9=		OR	X\$18=											
	Independent	. 9	Minus	•••	9	0	-	X40=		OR	X80=											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	+270=											
							į	TOTAL ADDIT, FEE	Ð	OR	TOTAL ADDIT, FEE											
(Column 1) (Column 2) (Column 3)																						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HESY MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	•	Minus	0.2		8		X\$ 9=		OR	X\$18=											
	Independent		Minus	•••		-	41	X40=		OR	X80=											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						4	+135=		OR	+270=											
If the entry in column 1 is less that, the entry in column 2 write "0" in column 3.																						
	rid ann Allahami bhi	mbre Omedraiche S	old For IN TH	S SPACE	is loss the	an 3. emter "3."			propriate bo	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												